

Exhibit A-2

GHODS LAW FIRM

Attorneys At Law

2100 North Broadway, Suite 210
Santa Ana, California 92706-2624
Telephone (714) 558-8580
Facsimile (714) 558-8579

Via E-Mail to ResCapLiquidatingTrust@ResCapEstate.com

January 13, 2015

Re: Claim Number 3503

Dear Sir/Madam:

This is in response to your letter of December 17, 2014.

1. Your letter references an attached form but none was enclosed.
2. This is our effort to respond to your request without the benefit of your form.
 - a. The proof of claim is attached as Exhibit "A".
 - b. Our claim is for misapplication of the payments we were forced to pay for improperly issued lender placed hazard insurance on a mortgage during a time frame when no insurable interest on the subject property existed. The lender did not record the mortgage and the property was sold therefore there was no property to insure. We brought the matter to the lender's attention who informed us that it would be rectified but that all payments demanded should be made while the matter was in process to avoid a default of the loan and bad credit consequences for us. We paid the amounts demanded under protest. Unfortunately the lender never corrected the situation before filing bankruptcy. The payments we were forced to make were extra beyond our monthly loan payments but were not credited to the balance of the loan. According to our records (copies attached), we paid the following amounts up to the bankruptcy time frame:

| | |
|------|------------|
| 2004 | \$1,665.00 |
| 2005 | \$1,807.00 |
| 2006 | \$1,771.00 |
| 2007 | \$2,245.00 |
| 2008 | \$2,245.00 |
| 2009 | \$1,778.00 |
| 2010 | \$1,778.00 |
| 2011 | \$862.00 |
| 2012 | \$894.00 |

ResCap Email
January 13, 2015
Page 2

The above sums should have been applied to the principal of the loan resulting in a concomitant reduction for interest payments that support the claim we have made. Therefore, our claim is valid and should be allowed for payment from the estate.

Thank you for your attention.

--

A handwritten signature in dark ink, appearing to read "M.K. Ghods". The signature is fluid and cursive, with the first name "M.K." and the last name "Ghods" clearly distinguishable.

Mohammed K. Ghods, Esq.
GHODS LAW FIRM
2100 N. Broadway, Suite 210
Santa Ana, CA 92706
714-558-8580 Tele.
714-558-8579 Fax

EXHIBIT A

EXHIBIT A

Claim #3503 Date Filed: 11/7/2012

B 10 Modified (Official Form 10) (12/11)

| UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW YORK | | | PROOF OF CLAIM |
|---|--|--|--|
| Name of Debtor and Case Number: Residential Capital, LLC, Case No. 12-12020 | | | |
| <small>NOTE: This form should not be used to make a claim for an administrative expense (other than a claim asserted under 11 U.S.C. § 503(b)(9)) arising after the commencement of the case. A "request" for payment of an administrative expense (other than a claim asserted under 11 U.S.C. § 503(b)(9)) may be filed pursuant to 11 U.S.C. § 503.</small> | | | |
| Name of Creditor (the person or other entity to whom the debtor owes money or property): Mohammed K. Ghods & Heidi M. Ghods | | | <input type="checkbox"/> Check this box if this claim amends a previously filed claim. |
| Name and address where notices should be sent: 2100 North Broadway Santa Ana, CA 92705 | | | Court Claim Number: _____ (If known) |
| Telephone number: 714-558-8580 email: mghods@ghodslaw.com | | | Filed on: _____ |
| Name and address where payment should be sent (if different from above): Same | | | <input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars. |
| Telephone number: _____ email: _____ | | | 5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount. |
| 1. Amount of Claim as of Date Case Filed: \$ 60,000.00 (Est) If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges. | | | <input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). |
| 2. Basis for Claim: GMAC's failure to credit funds to account (please see attached documents) (See instruction #2) | | | <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507 (a)(4). |
| 3. Last four digits of any number by which creditor identifies debtor: 3204 | 3a. Debtor may have scheduled account as: GMAC Mortgage (See instruction #3a) | 3b. Uniform Claim Identifier (optional): _____ (See instruction #3b) | |
| 4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable (when case was filed) Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____ | | | |
| 6. Claim Pursuant to 11 U.S.C. § 503(b)(9): Indicate the amount of your claim arising from the value of any goods received by the Debtor within 20 days before May 14, 2012, the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim. \$ _____ (See instruction #6) | | | |
| 7. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #7) | | | |
| 8. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #8, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: | | | |
| 9. Signature: (See instruction #9) Check the appropriate box. <input checked="" type="checkbox"/> I am the creditor. <input type="checkbox"/> I am the creditor's authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. <input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (Attach copy of power of attorney, if any.) (See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.) I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. Print Name: Mohammed K. Ghods Title: creditor Company: _____ Address and telephone number (if different from notice address above): _____ Telephone number: _____ Email: _____ | | | |
| Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or | | | |

RECEIVED
NOV 07 2012
KURTZMAN CARSON CONSULTANTS
COURT USE ONLY



121202012110700000000087

PROOF OF CLAIM ATTACHMENT

**UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN
DISTRICT OF NEW YORK**

Residential Capital, LLC, Case No. 12-12020

GMAC Mortgage erroneously placed property insurance on a property that was not owned by the borrowers at the relevant times and upon which GMAC had no security interest. Borrowers brought the error to GMAC's attention repeatedly and were promised a correction would be made. GMAC demanded that payments had to be made as billed to avoid adverse credit reporting and collection action. Borrowers made the payments as demanded under protest. No correction has yet been made. No payoff statement has been sent as demanded. Borrowers believe excess monthly payments must be retroactively applied to reduce the principal balance accordingly. Attached are letters exchanged between the borrowers and GMAC regarding this issue as well a sample of notice of insurance placement sent to the borrowers regarding insurance placement.

GHODS LAW FIRM
Attorneys At Law

2100 North Broadway, Suite 101
Santa Ana, California, 92706-2624
Telephone (714) 558-8580
Facsimile (714) 558-8579

June 8, 2010

VIA U.S. MAIL

GMAC Mortgage
P.O. Box 780
Waterloo, IA 50704-0780

RE: Account Number:

██████████ 3204

Property:

12752 Keith Place, Tustin, CA 92780

Dear Sir/Madam:

Thank you for your letter of May 26, 2010. We have previously advised you on a number of occasions that we are being charged for insurance on the above referenced property which we have not owned for years. In prior communications, we were told we needed to make the payments to avoid adverse credit reporting, but that the payments received will be eventually credited to our mortgage account. We continue to get notices for more insurance and charges for useless insurance. Please take the corrective measures immediately and correct our account.

Also, we are enclosing the Orange County Tax Assessor's office information showing the history of ownership for the subject property. It is our understanding that you have access to the same information on-line.

Please confirm for us that this matter has been corrected and our payments have been credited properly. Also, please consider this letter as a formal payoff demand. We expect that the payoff demand will properly reflect a correct balance that includes credit for payments erroneously collected for insurance.

Thank you for your attention.

Very Truly Yours,
GHODS LAW FIRM


Mohammed K. Ghods

MKG:rel
Enclosure

REAL PROPERTY TAX ASSESSOR RECORD

Tax Roll Certification Date: 06-29-2008
Owner Information Current Through: 02-10-2010
County Last Updated: 02-26-2010
Current Date: 05/23/2010
Source: TAX ASSESSOR ORANGE, CALIFORNIA

OWNER INFORMATION

Owner(s): CORMAN QANTAS
TARABAY LUCULIA
Owner Relationship: HUSBAND/WIFE
Ownership Rights: JOINT TENANCY
Absentee Owner: SITUS FROM SALE (OCCUPIED)
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

PROPERTY INFORMATION

County: ORANGE
Assessor's Parcel Number: 103-342-30
Property Type: SINGLE FAMILY RESIDENCE - TOWNHOUSE
Land Use: SINGLE FAMILY RESIDENCE
Lot Size: 8500
Lot Acreage: 0.2600
Tract/Subdivision Number: 2620
Legal Description: N TR 2620 LOT 18
Lot Number: 18

TAX ASSESSMENT INFORMATION

Tax Year: 2008
Estimated Tax Year:
Calculated Land Value: \$583,633.00
Calculated Improvement Value: \$92,867.00
Calculated Total Value: \$676,500.00
Assessed Land Value: \$583,633.00
Assessed Improvement Value: \$92,867.00
Assessed Total Value: \$676,500.00
Valuation Method: ASSESSED
Tax Amount: \$7,348.56
Tax Code Area: 89058

BUILDING/IMPROVEMENT CHARACTERISTICS

Number of Buildings: 1
Year Built: 1956
Total Area: 8500
Living Square Feet: 1945
Total Number of Rooms: 8
Number of Bedrooms: 4
Number of Bathrooms: 1.00
Full Baths: 1

Basement Type: UNFINISHED
Fireplace: YES
Garage Type: ATTACHED GARAGE/CARPORT
Pool: Y
Pool Type: TYPE UNKNOWN
Number of Stories: 2.00
Style/Shape: CONTEMPORARY
Construction Quality: AVERAGE
Exterior Wall Type: STUCCO
Heat: BASEBOARD HOT WATER
Water: PUBLIC
Sewer: PUBLIC
A/C Type: AC CENTRAL

LAST FULL MARKET SALE INFORMATION

Sale Date: 09/05/2008
Seller Name: AURORA LN SVCS LLC
Sale Price: \$525,000.00
Consideration: FULL
Deed Type: GRANT DEED
Type of Sale: RESALE
Mortgage Amount: \$502,326.00
Mortgage Loan Type: FEDERAL HOUSING AUTHORITY
Mortgage Term: 30 YEARS
Mortgage Deed Type: DEED OF TRUST
Lender Name: BROADVIEW MTG
Recording Date: 10/15/2008
Document Number: 477262
Title Company: FIDELITY NATIONAL TITLE

PREVIOUS TRANSACTION INFORMATION

Previous Document Number: 479719
Sale Date: 05/20/2005
Sale Price: \$739,000.00
Consideration: FULL
Deed Type: DEED OF TRUST
Mortgage Amount: \$591,200.00
Recording Date: 06/21/2005

HISTORICAL TAX ASSESSOR INFORMATION

Historical Tax Assessor Record 1.

Tax Year: 2008
Calculated Land Value: \$419,451.00
Calculated Improvement Value: \$105,549.00
Calculated Total Value: \$525,000.00
Assessed Total Value: \$525,000.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Absentee Owner: OWNER OCCUPIED
Owner: CORMAN QANTAS
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Historical Tax Assessor Record 2.

Tax Year: 2007
Calculated Land Value: \$583,633.00
Calculated Improvement Value: \$92,867.00
Calculated Total Value: \$676,500.00
Assessed Total Value: \$676,500.00
Assessor's Parcel Number: 103-342-30
Absentee Owner: OWNER OCCUPIED
Owner: AURORA LN SVCS LLC
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Historical Tax Assessor Record 3.

Tax Year: 2006
Calculated Land Value: \$675,988.00
Calculated Improvement Value: \$92,867.00
Calculated Total Value: \$768,855.00
Assessed Total Value: \$768,855.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Absentee Owner: OWNER OCCUPIED
Owner: REA LORENZO H
REA HILDA
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Historical Tax Assessor Record 4.

Tax Year: 2005
Calculated Land Value: \$662,733.00
Calculated Improvement Value: \$91,047.00
Calculated Total Value: \$753,780.00
Assessed Total Value: \$753,780.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Absentee Owner: OWNER OCCUPIED
Owner: REA LORENZO H
REA HILDA
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Historical Tax Assessor Record 5.

Tax Year: 2003
Calculated Land Value: \$419,720.00
Calculated Improvement Value: \$74,980.00
Calculated Total Value: \$494,700.00
Assessed Total Value: \$494,700.00
Assessor's Parcel Number: 103-342-30
Absentee Owner: ABSENTEE (MAIL AND SITUS NOT=)
Owner: CIVIC PLAZA PROPERTIES
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 615 CIVIC CENTER DR
SANTA ANA, CA 92701-4030

Historical Tax Assessor Record 6.

Tax Year: 2002
Calculated Land Value: \$411,490.00
Calculated Improvement Value: \$73,510.00
Calculated Total Value: \$485,000.00
Assessed Total Value: \$485,000.00
Assessor's Parcel Number: 103-342-30
Absentee Owner: ABSENTEE (MAIL AND SITUS NOT=)
Owner: CIVIC PLAZA PROPERTIES
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 615 CIVIC CENTER DR
SANTA ANA, CA 92701-4030

Historical Tax Assessor Record 7.

Tax Year: 2001
Calculated Land Value: \$236,295.00
Calculated Improvement Value: \$80,914.00
Calculated Total Value: \$317,209.00
Assessed Total Value: \$317,209.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Absentee Owner: YES
Owner: CIVIC PLAZA PROPERTIES LP
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 615 CIVIC CENTER DR
SANTA ANA, CA 92701-4030

Historical Tax Assessor Record 8.

Tax Year: 2001
Calculated Land Value: \$236,295.00
Calculated Improvement Value: \$80,914.00
Calculated Total Value: \$317,209.00
Assessed Total Value: \$317,209.00

Assessor's Parcel Number: 103-342-30
Absentee Owner: ABSENTEE (MAIL AND SITUS NOT=)
Owner: CIVIC PLAZA PROPERTIES LP
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 615 CIVIC CENTER DR
SANTA ANA, CA 92701-4030

Historical Tax Assessor Record 9.

Tax Year: 2000
Calculated Land Value: \$179,756.00
Calculated Improvement Value: \$72,335.00
Calculated Total Value: \$252,091.00
Assessed Total Value: \$252,091.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Owner: GHODS MOHAMMED K
GHODS HEIDI M
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

Historical Tax Assessor Record 10.

Tax Year: 1999
Calculated Land Value: \$176,232.00
Calculated Improvement Value: \$70,917.00
Calculated Total Value: \$247,149.00
Assessed Total Value: \$247,149.00
Assessor's Parcel Number: 103-342-30
Homestead Exempt: HOMEOWNER EXEMPTION
Owner: GHODS MOHAMMED K
GHODS HEIDI M
Property Address: 12752 KEITH PL
TUSTIN, CA 92780-3510
Mailing Address: 12752 KEITH PL
TUSTIN, CA 92780-3510

TRANSACTION HISTORY REPORT is available for this property. The report contains details about all available transactions associated with this property. The report may include information about sales, ownership transfers, refinances, construction loans, 2nd mortgages, or equity loans based on recorded deeds. Additional charges may apply.

Call Westlaw CourtExpress at 1-877-DOC-RETR (1-877-362-7387)
to order copies of documents related to this or other matters.
Additional charges apply.

| Rank | Name | Property Address | City-State |
|------------------------------|-----------|----------------------------|----------------|
| Transaction/Record Date | | | |
| Select to print, e-mail, etc | | | |
| Tag to Print 1 | 1 | MYERS DANIEL N | 12752 KEITH PL |
| | TUSTIN CA | 01/1989 | |
| Tag to Print 2 | 2 | GHODS MOHAMMED K AND WIFE | 12752 KEITH |
| PL | TUSTIN CA | 01/1991 | |
| Tag to Print 3 | 3 | CIVIC PLAZA PROPERTIES LP | 12752 KEITH PL |
| | TUSTIN CA | 10/21/2001 | |
| Tag to Print 4 | 4 | JONES RANDOLPH P & THERESA | 12752 KEITH |
| PL | TUSTIN CA | 06/08/2004 | |
| Tag to Print 5 | 5 | REA LORENZO H & HILDA | 12752 KEITH PL |
| | TUSTIN CA | 05/20/2005 | |
| Tag to Print 6 | 6 | REA LORENZO H & HILDA | 12752 KEITH PL |
| | TUSTIN CA | 03/22/2006 | |
| Tag to Print 7 | 7 | REA LORENZO H & HILDA | 12752 KEITH PL |
| | TUSTIN CA | 03/22/2006 | |
| Tag to Print 8 | 8 | RESIDENTIAL FUNDING CO LLC | 12752 KEITH |
| PL | TUSTIN CA | 05/15/2008 | |
| Tag to Print 9 | 9 | RESIDENTIAL FUNDING CO LLC | 12752 KEITH |
| PL | TUSTIN CA | 05/15/2008 | |
| Tag to Print 10 | 10 | CORMAN QANTAS | 12752 KEITH PL |
| | TUSTIN CA | 09/05/2008 | |
| Tag to Print 11 | 11 | AURORA LN SVCS LLC | 12752 KEITH PL |
| | TUSTIN CA | 09/12/2008 | |
| Tag to Print 12 | 12 | CORMAN QANTAS | 12752 KEITH PL |
| | TUSTIN CA | 10/16/2009 | |
| Tag to Print 13 | 13 | GHODS MOHAMMED AND WIFE | 12752 KEITH |
| PL | TUSTIN CA | 02/28/1991 | |
| Tag to Print 14 | 14 | GHODS MOHAMMED AND WIFE | 12752 KEITH |
| PL | TUSTIN CA | 03/19/1991 | |
| Tag to Print 15 | 15 | GHODS MOHAMMED K | 12752 KEITH PL |
| | TUSTIN CA | 01/28/2000 | |
| Tag to Print 16 | 16 | GHODS MOHAMMED K AND WIFE | 12752 KEITH |
| PL | TUSTIN CA | 09/25/1998 | |

GMAC Mortgage

3451 Hammond Ave
P.O. Box 780
Waterloo, IA 50704-0780

05/26/10

Mohammed K. and Heidi M. Ghods
11022 Bent Tree Lane
Santa Ana, CA 92705

RE: Account Number [REDACTED] 3204
Property Address 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed K. and Heidi M. Ghods:

We received information indicating there may have been a name or title change on the above-referenced property. Please send us a copy of the the recorded deed transferring title showing evidence of this change to PO Box 780 , Waterloo, IA 50704-0780, or Federal Express to 3451 Hammond Avenue, Waterloo IA 50702, ATTN: Assumption Department. You may also fax this information to 972-538-0739.

If you have any questions, please contact Customer Care at 800-766-4622.

Customer Care
Loan Servicing

Initials: SL

4:78

5901
3204

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/02/2010

000004 - 000015
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT RENEWAL NOTIFICATION CERTIFICATE

RE: **REFERENCE NUMBER: 5901**

Loan Number: [REDACTED] 3204
Hazard Insurance Uninsured Date: 06/27/2010
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: M-7093936
Effective Date: 06/27/2010
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2011
Annual Charge: \$1,778.00

Deductible: \$1,000.00

Dear Customer:

During the past 60 days, we notified you that the lender-placed hazard insurance we previously obtained on your property would be renewed for an additional term of one year, if we did not receive a copy of a valid hazard insurance policy.

This letter is to notify you that, as we have not received the required evidence of coverage, we have renewed your lender-placed hazard insurance coverage with MERITPLAN INSURANCE COMPANY to provide the necessary insurance protection on your property as required under the terms of your mortgage / deed of trust.

The cost of the insurance in the amount of \$1,778.00 was advanced for the period 06/27/2010 to 06/27/2011. This amount is based on our records which indicate the occupancy status of the location above is Owner Occupied and the dwelling is a 51+ year old home. If this information is incorrect, please contact us at (800) 256-9962. The coverage amount placed is based on the replacement value, which we believe is the last known amount of coverage you purchased. If, however, we do not have that information, the coverage amount is based on the unpaid principal balance of all mortgage liens against the property that are serviced by us. Lender-placed hazard insurance does not provide guaranteed replacement cost coverage.

This insurance will remain in force unless we received evidence of a hazard insurance policy with an effective date on or before 06/27/2010. As set forth in our previous notices, pursuant to your mortgage / deed of trust, the cost of this coverage is your responsibility and will be included in any statements that you may receive going forward. If you obtain coverage on your own and there is a lapse between the effective date of your policy and the lender-placed hazard insurance coverage, you will be responsible for the insurance charges for that period. Any insurance charges not used will be credited to your account.

NOTICE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance
Risk Based Protection

MERITPLAN INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/02/2010

Control Number: M7093936

Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2010 Until: 06/27/2011, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

| | |
|------------|----------|
| \$1,000.00 | Occupied |
| \$1,000.00 | Vacant |

PREMIUM: Insurance premium:

\$1,778.00

Total Premium:

\$1,778.00

The NAMED INSURED has purchased insurance on the DESCRIBED LOCATION for the amount and premium indicated above.

The contract of insurance is only between the NAMED INSURED and Meritplan Insurance Company. There is no contract of insurance between the BORROWER and Meritplan Insurance Company. The insurance purchased is intended for the benefit and protection of the NAMED INSURED, insures against LOSS only to the dwelling and OTHER STRUCTURES on the DESCRIBED LOCATION, and may not sufficiently protect the BORROWER'S interest in the property. No coverage is provided for contents, personal effects, additional living expense, fair rental value or liability. NO COVERAGE IS PROVIDED FOR LOSS CAUSED BY EARTHQUAKE OR FLOOD or any other cause of loss that is excluded by the Residential Property Fire Insurance Form. The NAMED INSURED may cancel the insurance coverage at any time.

This NOTICE is for information purposes only. It does not amend, extend, or alter the insurance contained in the Residential Property Fire Insurance Form. Any coverage provided is subject to the terms, conditions, limitations and exclusions contained in the Residential Property Fire Insurance Form.

To report a claim, call: (800) 323-7466

For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 2, 2010

POLICY NUMBER: [REDACTED] 8936

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

MERITPLAN INSURANCE COMPANY
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

Date: JULY 2, 2010

Control Number: M-7093936

000004 - 000021

MOHAMMED GHODS

HEIDI GHODS

11022 BENT TREE RD

SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the MERITPLAN Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), MERITPLAN will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER **
TO ACTIVATE EARTHQUAKE COVERAGE**

**YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.**

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to MERITPLAN Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number M7093936. The coverage amount will be \$254,000.00.

Signature

Date

PROOF OF SERVICE

STATE OF CALIFORNIA,)
) ss:
COUNTY OF ORANGE)

I am employed in the County of Orange, State of California. I am over the age of eighteen years and not a party to the within action. My business address is 2100 North Broadway, Suite 101, Santa Ana, CA 92706.

On November 7, 2012, I caused to be personally served via Nationwide Legal Services, the following document(s) described as:

**PROOF OF CLAIM RE RESIDENTIAL CAPITAL, LLC, CASE NO. 12-12020 FOR
THE U.S. BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW
YORK**

on the interested parties by delivering a true copy thereof, to:

ResCap Claims Processing Center, c/o KCC
2335 Alaska Avenue
El Segundo, CA 90245

☒ **VIA PERSONAL SERVICE BY CERTIFIED PROCESS SERVER:**

I declare under penalty of perjury under the laws of the United States of America and the State of California that the foregoing is true and correct and that this document was executed on November 7, 2012, at Santa Ana, California.


JUDITH DUENES

GMAC Mortgage

SPECIAL DELINQUENT TAX NOTICE

6/9/2008

Mohammed K. Ghods
Heidi M. Ghods
11022 Bent Tree Rd
Santa Ana, CA 92705-2514

Dear Mortgagor:

Notice- This is an attempt to collect a debt and any information obtained will be used for that purpose." If your debt has been discharged in bankruptcy, our rights are being exercised against the collateral for the above referenced loan, not as a personal liability.

We have recently completed our annual research of the official tax records and as of May 09, 2008; the records indicated your taxes had not been paid. Since your account reflects you are responsible for payment of these taxes, non-payment of these taxes prior to the delinquency date constitutes a default under the terms of your mortgage or deed of trust and places your loan in jeopardy.

| --Parcel No.-- | Year | Instl | Base Amt | ---Payee--- |
|----------------|-----------|-------|------------|---------------|
| 103-342-30 | 2007/2008 | 1,2 | \$8,105.52 | Orange County |

If you have paid the item(s) listed below, please forward a copy of the paid receipt or canceled check in the envelope provided. If you have not paid the delinquent item(s) shown, please do so immediately and forward a copy of the receipt in the envelope enclosed. If you have made arrangements with the taxing authority, please forward a signed copy of the agreement. 'DO NOT SEND MONIES FOR PAYMENT OF THESE TAXES TO OUR OFFICE. PAYMENT SHOULD BE MADE DIRECTLY TO THE TAX OFFICE.' (THIS INFORMATION MUST BE RECEIVED WITHIN 30 DAYS FROM THE DATE OF THIS LETTER.)

Any redemption amounts shown are estimated. Penalty calculations may vary by agency, please contact your tax collector for the exact amount to pay.

Should you be unable to pay your taxes at this time, you may wish to contact the tax collector to establish a repayment plan with them. You need to do this immediately, a confirmation of this repayment plan must be forwarded to our office within 30 days from the date of this letter.

If we have not received proof of payment or receipt of verification for a repayment plan with the tax collector within 30 days of this letter, GMAC Mortgage will advance the delinquent taxes and penalties, and begin escrowing for future taxes. Your payment will be adjusted to collect for the tax amount advanced, future tax amounts and interest on the tax amounts and interest on the tax advancement over a 12-month period.

Cut and return with **Proof** of Tax Payment

NOTE: DO NOT SEND TAX OR MORTGAGE PAYMENTS TO THIS ADDRESS. REMIT TAX PAYMENTS TO LOCAL TAX AGENCY. SEND MORTGAGE PAYMENTS TO THE ADDRESS ON YOUR BILLING STATEMENT.

Order: 09678687

Loan Number: [REDACTED] 3204

Base Amount: \$8,105.52

Parcel: 103-342-30
Orange County
714-834-3411

GMAC Mortgage - 0005319
P.O. Box 961247
Ft. Worth, TX 76161-0247

RG1

GMAC Mortgage

First Mortgage Loan Servicing
PO Box 10430
Van Nuys, CA 91410-0430

Notification Date: 10/20/2004

0001079 - 0001585 L

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE LANE
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: Loan Number: [REDACTED] 3204
Hazard Insurance Uninsured Date: 06/27/2004
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate # : B-7079804
Effective Date: 06/27/2004 Expiration Date: 06/27/2005
Dwelling Limit: \$208,445 Annual Charge: \$1,665.00
Residential Deductible: \$500.00 (except GU, NM, OK, VT and WV -
Deductible \$250.00)
Commercial Deductible: \$500.00 (except CA, GU, NM and WV - Deductible
\$1,000.00)
Commercial VMM Deductible: \$5,000.00 or 2% whichever is greater
(Deductible may change if occupancy changes.)

Dear Customer:

We have obtained insurance coverage with BALBOA INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 90 days that this insurance would be placed if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$1,665.00 was advanced for the period 06/27/2004 to 06/27/2005. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2004. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect the equity in the property. If your property is located in the state of AK, AZ, AR, CA, CO, CT, DE, IN, KY, MA, MD, MN, MO, NC, NH, NY, OK, RI, SC, TN, VA, WA, or WV, the coverage limit on this policy will be the lesser of the principal balance on the loan at the time of placement or the last known amount on any insurance policy which you previously purchased on your own. If your property is located in any other state besides those listed in the previous sentence, the coverage will be placed at the principal balance of the loan. If the limit is only sufficient to insure the principal balance of your loan then the force-placed policy may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange on your own. We recommend you place full insurance coverage that adequately protects both your and the lender's interest with a company of your choice.

Page 2

MOHAMMED GHODS

Loan Number: [REDACTED] 3204

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

Should you have any questions regarding this matter, please do not hesitate to contact our office at (800) 256-9962 from 5 a.m. to 7 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Thank you,

Insurance Department
GMAC Mortgage Corporation

MAIL POLICY TO:

GMAC Mortgage Corporation
P.O. Box 10430
Van Nuys, CA 91410

Or Fax to: (626) 927-4450

Balboa Insurance Company
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

Mailing Date: OCTOBER 20, 2004

92705-2514

Certificate Number: B7079804
Loan Number: [REDACTED] 3204

Dear Certificateholder:

In accordance with your state's law, we are required to notify you that your forced order certificate DOES NOT provide coverage against the peril of Earthquake and that Earthquake coverage is offered to you at your option.

The coverage, subject to certificate provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$208,445
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$938.00

You must ask the Balboa Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), Balboa will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date of your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER **
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION UNLESS WE HEAR FROM YOU.

If you wish to add earthquake coverage to your certificate, please complete the section below, sign and return this letter to Balboa Insurance Company. We will bill you the appropriate premium for the period from the effective date of your earthquake coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

_____ Yes, please add earthquake coverage to certificate number B7079804.
The coverage amount will be \$208,445.

Signature _____

Date _____

5901

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

MAILING DATE: OCTOBER 20, 2004

92705-2514 POLICY NUMBER: [REDACTED] 9804

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

GMAC Mortgage

First Mortgage Loan Servicing
PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/01/2005

0000157 - 0000285 L

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE LANE
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: REFERENCE NUMBER: 5901
Loan Number: [REDACTED] 3204
Hazard Insurance Uninsured Date: 06/27/2005
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate # : B-7117842
Effective Date: 06/27/2005 Expiration Date: 06/27/2006
Dwelling Limit: \$204,364 Annual Charge: \$1,807.00
Residential Deductible: \$500.00 (except GU, NM, OK, VT and WV -
Deductible \$250.00)
Commercial Deductible: \$500.00 (except CA, GU, NM and WV - Deductible
\$1,000.00)
Commercial VMM Deductible: \$5,000.00 or 2% whichever is greater
(Deductible may change if occupancy changes.)

Dear Customer:

We have obtained insurance coverage with BALBOA INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 90 days that this insurance would be placed if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$1,807.00 was advanced for the period 06/27/2005 to 06/27/2006. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2005. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect the equity in the property. If your property is located in the state of AK, AZ, AR, CA, CO, CT, DE, IN, KY, MA, MD, MN, MO, NC, NH, NY, OK, RI, SC, TN, VA, WA, or WV, the coverage limit on this policy will be the lesser of the principal balance on the loan at the time of placement or the last known amount on any insurance policy which you previously purchased on your own. If your property is located in any other state besides those listed in the previous sentence, the coverage will be placed at the principal balance of the loan. If the limit is only sufficient to insure the principal balance of your loan then the force-placed policy may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange on your own. We recommend you place full insurance coverage that adequately protects both your and the lender's interest with a company of your choice.

Page 2

MOHAMMED GHODS

Loan Number: [REDACTED] 83204

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

Should you have any questions regarding this matter, please do not hesitate to contact our office at (800) 256-9962 from 5 a.m. to 7 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Thank you,

Insurance Department
GMAC Mortgage Corporation

MAIL POLICY TO:

GMAC Mortgage Corporation
P.O. Box 4025
Coraopolis, PA 15108-6942

Or Fax to: (626) 927-4450

Balboa Insurance Company
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

Mailing Date: JULY 1, 2005

92705-2514

Certificate Number: B7117842
Loan Number: [REDACTED] 3204

Dear Certificateholder:

In accordance with your state's law, we are required to notify you that your forced order certificate DOES NOT provide coverage against the peril of Earthquake and that Earthquake coverage is offered to you at your option.

The coverage, subject to certificate provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$204,364
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$919.64

You must ask the Balboa Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), Balboa will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date of your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION UNLESS WE HEAR FROM YOU.

If you wish to add earthquake coverage to your certificate, please complete the section below, sign and return this letter to Balboa Insurance Company. We will bill you the appropriate premium for the period from the effective date of your earthquake coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

_____ Yes, please add earthquake coverage to certificate number B7117842.
The coverage amount will be \$204,364.

Signature _____

Date _____

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

MAILING DATE: JULY 1, 2005
92705-2514 POLICY NUMBER: [REDACTED] 7842

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 06/30/2006

0000411 - 0000840 L

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE LANE
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: REFERENCE NUMBER: 5901
Loan Number: [REDACTED] B204
Hazard Insurance Uninsured Date: 06/27/2006
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate # : B-7165058
Effective Date: 06/27/2006 Expiration Date: 06/27/2007
Dwelling Limit: \$200,328 Annual Charge: \$1,771.00
Residential Deductible: \$500.00 (except GU, NM, OK, VT and WV -
Deductible \$250.00)
Commercial Deductible: \$500.00 (except CA, GU, NM and WV - Deductible
\$1,000.00)
Commercial VMM Deductible: \$5,000.00 or 2% whichever is greater
(Deductible may change if occupancy changes.)

Dear Customer:

We have obtained insurance coverage with BALBOA INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 90 days that this insurance would be placed if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$1,771.00 was advanced for the period 06/27/2006 to 06/27/2007. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2006. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect the equity in the property. If your property is located in the state of AK, AZ, AR, CA, CO, CT, DE, IN, KY, MA, MD, MN, MO, NC, NH, NY, OK, RI, SC, TN, VA, WA, or WV, the coverage limit on this policy will be the lesser of the principal balance on the loan at the time of placement or the last known amount on any insurance policy which you previously purchased on your own. If your property is located in any other state besides those listed in the previous sentence, the coverage will be placed at the principal balance of the loan. If the limit is only sufficient to insure the principal balance of your loan then the force-placed policy may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange on your own. We recommend you place full insurance coverage that adequately protects both your and the lender's interest with a company of your choice.

Page 2

MOHAMMED GHODS

Loan Number: [REDACTED] 3204

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

Should you have any questions regarding this matter, please do not hesitate to contact our office at (800) 256-9962 from 5 a.m. to 7 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Thank you,

Insurance Department
GMAC Mortgage Corporation

MAIL POLICY TO:

GMAC Mortgage Corporation
P.O. Box 4025
Coraopolis, PA 15108-6942

Or Fax to: (866) 336-9021

Balboa Insurance Company
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

92705-2514

Mailing Date: JUNE 30, 2006

Certificate Number: B7165058
Loan Number: [REDACTED] 3204

Dear Certificateholder:

Coverage provided does not include protection against the peril of earthquake. California law requires that Earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$200,328
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$901.48

You must ask the Balboa Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), Balboa will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date of your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION UNLESS WE HEAR FROM YOU.

If you wish to add earthquake coverage to your certificate, please complete the section below, sign and return this letter to Balboa Insurance Company. We will bill you the appropriate premium for the period from the effective date of your earthquake coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

_____ Yes, please add earthquake coverage to certificate number B7165058.
The coverage amount will be \$200,328.

Signature _____

Date _____

5901

Exhibit A-2 Pg 32 of 61
EVIDENCE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance Coverage
Lenders Protection Program

BALBOA INSURANCE COMPANY
(a stock company)
Home Office
3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 06/30/2006

BORROWER:
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE LANE
SANTA ANA, CA 92705-2514

Control Number: B7165058
Master Policy Number: [REDACTED] 0002
Loan Number: [REDACTED] 3204

NAMED INSURED:
GMAC MORTGAGE CORPORATION
INSURANCE SERVICE CENTER
P.O BOX 4025
CORAOPOLIS, PA
15108-6942

Coverage Period: From: 06/27/2006 Until: 06/27/2007
Beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:
12752 KEITH PLACE
TUSTIN CA
92780

LIMIT OF LIABILITY FOR
RESIDENTIAL PROPERTY:
\$200,328

| | | |
|--------------|-------|----------------------|
| DEDUCTIBLES: | \$500 | Residential Occupied |
| | \$750 | Residential Vacant |

| | | |
|----------|--------------------|------------|
| PREMIUM: | Insurance premium: | \$1,771.00 |
| | Total premium: | \$1,771.00 |

Your lender has ordered insurance on the above-listed property for the coverage amount and premium indicated. This insurance may not sufficiently protect your interest in the property and covers only loss to the dwelling and other structures. Coverage is limited to perils insured under our agreement with your lender and is subject to all limitations and exclusions set forth thereon. Coverage is not afforded for building code upgrades.

This memorandum is for information only. It neither amends, extends nor alters the coverage afforded under the agreement it describes.

To report a claim, call: (800) 323-7466
For other inquiries, call: (800) 256-9962

01A09-MFNO0008-E0104

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE LANE
SANTA ANA, CA

MAILING DATE: JUNE 30, 2006
92705-2514 POLICY NUMBER: [REDACTED] 5058

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/01/2007

000038 - 000081
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: **REFERENCE NUMBER: 5901**
Loan Number: 3204
Hazard Insurance Uninsured Date: 06/27/2007
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: B-7225465
Effective Date: 06/27/2007
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2008
Annual Charge: \$2,245.00

Deductibles: All perils except Windstorm/Hail
Residential Occupied: \$500 (except GU, NM, OK, VT, WV - Deductible \$250)
Residential Vacant: \$750 (except OK, VT - Deductible \$500 and GU, NM, WV - Deductible \$1,000)
Commercial Occupied: \$500 (except CA, GU - Deductible \$1,000)
Commercial Vacant: \$1,000 or 2% of the insured amount, whichever is greater
Vandalism and Malicious Mischief: \$5,000 or 2% of the insured amount, whichever is greater
(Deductibles may change if occupancy changes.)

For Residential properties in the following states: AL, FL, GA, HI, LA, MS, NC, SC and TX
Windstorm/Hail Deductible Applies: Greater of \$2,000 or 2% of dwelling limit

Dear Customer:

We have obtained lender-placed insurance coverage with BALBOA INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 90 days that this insurance would be placed if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$2,245.00 was advanced for the period 06/27/2007 to 06/27/2008. The coverage amount placed would be based on the replacement value, which we believe is the last known amount of coverage you purchased. If we do not have that information, the coverage amount will be based on the current principal balance of your mortgage loan. Lender-placed insurance does not provide guaranteed replacement cost coverage. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2007. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect the equity in

EVIDENCE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance Coverage
Lenders Protection program

BALBOA INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/01/2007

Control Number: B7225465

Master Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2007 Until: 06/27/2008, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

| | |
|----------|----------------------|
| \$500.00 | Residential Occupied |
| \$750.00 | Residential Vacant |

PREMIUM:

Insurance premium: \$2,245.00

Total premium: \$2,245.00

Your lender has ordered insurance on the above-listed property for the coverage amount and premium indicated. This insurance may not sufficiently protect your interest in the property and covers only loss to the dwelling and other structures. Coverage is limited to perils insured under our agreement with your lender and is subject to all limitations and exclusions set forth thereon. Coverage is not afforded for building code upgrades.

This memorandum is for information only. It neither amends, extends nor alters the coverage afforded under the agreement it describes.

To report a claim, call: (800) 323-7466
For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 1, 2007

POLICY NUMBER: [REDACTED] 5465

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

BALBOA INSURANCE COMPANY
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

Date: JULY 1, 2007

Control Number: [REDACTED] 5465

000038 - 000087

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the BALBOA Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), BALBOA will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to BALBOA Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number B7225465. The coverage amount will be \$254,000.00.

Signature

Date

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/02/2008

000020 - 000045
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: **REFERENCE NUMBER: 5901**

Loan Number: 3204
Hazard Insurance Uninsured Date: 06/27/2008
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: B-7471706
Effective Date: 06/27/2008
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2009
Annual Charge: \$2,245.00

Deductibles: All perils except Windstorm/Hail

Residential Occupied: \$500 (except GU, NM, OK, VT, WV - Deductible \$250)

Residential Vacant: \$750 (except OK, NM and VT - Deductible \$500, GU and WV - Deductible \$1,000)

Commercial Occupied: \$500 (except CA, GU - Deductible \$1,000)

Commercial Vacant: \$1,000 or 2% of the insured amount, whichever is greater

Vandalism and Malicious Mischief: \$5,000 or 2% of the insured amount, whichever is greater

(Deductibles may change if occupancy changes.)

For Residential properties in the following states: AL, FL, GA, HI, LA, MS, NC, SC and TX

Windstorm/Hail Deductible Applies: Greater of \$2,000 or 2% of dwelling limit

Dear Customer:

We have obtained lender-placed insurance coverage with BALBOA INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 90 days that this insurance would be placed if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$2,245.00 was advanced for the period 06/27/2008 to 06/27/2009. The coverage amount placed would be based on the replacement value, which we believe is the last known amount of coverage you purchased. If we do not have that information, the coverage amount will be based on the current principal balance of your mortgage loan. Lender-placed insurance does not provide guaranteed replacement cost coverage. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2008. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

EVIDENCE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance Coverage
Lenders Protection program

BALBOA INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/02/2008

Control Number: B7471706

Master Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2008 Until: 06/27/2009, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

\$500.00 Residential Occupied
\$750.00 Residential Vacant

PREMIUM:

Insurance premium: \$2,245.00

Total premium: \$2,245.00

Your lender has ordered insurance on the above-listed property for the coverage amount and premium indicated. This insurance may not sufficiently protect your interest in the property and covers only loss to the dwelling and other structures. Coverage is limited to perils insured under our agreement with your lender and is subject to all limitations and exclusions set forth thereon. Coverage is not afforded for building code upgrades.

This memorandum is for information only. It neither amends, extends nor alters the coverage afforded under the agreement it describes.

To report a claim, call: (800) 323-7466
For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 2, 2008

POLICY NUMBER: [REDACTED] 1706

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

BALBOA INSURANCE COMPANY
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

Exhibit A-2 Pg 41 of 61

Date: JULY 2, 2008

Control Number: B-7471706

000020 - 000051

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the BALBOA Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), BALBOA will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to BALBOA Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number B7471706. The coverage amount will be \$254,000.00.

Signature

Date

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/01/2009

000013 - 000035
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT

RE: **REFERENCE NUMBER: 5901**

Loan Number: 3204
Hazard Insurance Uninsured Date: 06/27/2009
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: M-7031313
Effective Date: 06/27/2009
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2010
Annual Charge: \$1,778.00

Deductible: \$1000.00

Dear Customer:

We have obtained lender-placed insurance coverage with MERITPLAN INSURANCE COMPANY to provide the necessary insurance protection under the terms of your mortgage. We have notified you during the past 60 days that this insurance would be placed for an additional one year term if we did not receive a copy of a valid hazard insurance policy.

The cost of the insurance in the amount of \$1,778.00 was advanced for the period 06/27/2009 to 06/27/2010. This amount is based on our records which show that the occupancy status of the location above is Owner Occupied and the dwelling is a 51+ year old home. If this information is incorrect, please contact us at 1-866-317-5830. The coverage amount placed is based on the replacement value, which we believe is the last known amount of coverage you purchased. If we do not have that information, the coverage amount is based on the current principal balance of your mortgage loan. Lender-placed insurance does not provide guaranteed replacement cost coverage. Appropriate changes to your monthly payment will be made as indicated in our previous letter.

This insurance will remain in force unless we receive evidence of a hazard insurance policy with an effective date on or before 06/27/2009. Evidence of a valid policy in effect at a later date will result in cancellation of the coverage. Any insurance charges not used will be credited to your account.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect the equity in the property. If the limit is only sufficient to insure the principal balance of your loan then the lender-placed policy may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange on your own. We recommend you place full insurance coverage that adequately protects both your and the lender's interest with a company of your choice. In the event of a claim, all amounts due under the policy will be paid to

RE: MOHAMMED GHODS
HEIDI GHODS
Loan Number: [REDACTED] 3204

GMAC Mortgage, LLC, except amounts which are in excess of GMAC Mortgage, LLC's interest which will be forwarded to you.

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC MORTGAGE, LLC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

Should you have any questions regarding this matter, please do not hesitate to contact our office at 1-866-317-5830 from 4 a.m. to 8 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Thank you,

Insurance Department
GMAC Mortgage, LLC

REMINDER...

MAIL POLICY TO:

GMAC MORTGAGE, LLC
ITS SUCCESSOR AND/OR ASSIGNS
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

Or Fax to: (866) 336-9021

Exhibit A-2 Pg 44 of 61
NOTICE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance
Risk Based Protection

MERITPLAN INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/01/2009

Control Number: M7031313

Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 8204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2009 Until: 06/27/2010, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

\$1,000.00 Occupied
\$1,000.00 Vacant

PREMIUM: Insurance premium:

\$1,778.00

Total Premium:

\$1,778.00

The NAMED INSURED has purchased insurance on the DESCRIBED LOCATION for the amount and premium indicated above.

The contract of insurance is only between the NAMED INSURED and Meritplan Insurance Company. There is no contract of insurance between the BORROWER and Meritplan Insurance Company. The insurance purchased is intended for the benefit and protection of the NAMED INSURED, insures against LOSS only to the dwelling and OTHER STRUCTURES on the DESCRIBED LOCATION, and may not sufficiently protect the BORROWER'S interest in the property. No coverage is provided for contents, personal effects, additional living expense, fair rental value or liability. NO COVERAGE IS PROVIDED FOR LOSS CAUSED BY EARTHQUAKE OR FLOOD or any other cause of loss that is excluded by the Residential Property Fire Insurance Form. The NAMED INSURED may cancel the insurance coverage at any time.

This NOTICE is for information purposes only. It does not amend, extend, or alter the insurance contained in the Residential Property Fire Insurance Form. Any coverage provided is subject to the terms, conditions, limitations and exclusions contained in the Residential Property Fire Insurance Form.

To report a claim, call: (800) 323-7466

For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 1, 2009

POLICY NUMBER: [REDACTED] 1313

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

MERITPLAN INSURANCE COMPANY
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

Exhibit A-2 Pg 46 of 61

Date: JULY 1, 2009

Control Number: M-7031313

000013 - 000041

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the MERITPLAN Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), MERITPLAN will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to MERITPLAN Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number M7031313. The coverage amount will be \$254,000.00.

Signature

Date

GMAC MortgagePO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/02/2010

000004 - 000015

MOHAMMED GHODS

HEIDI GHODS

11022 BENT TREE RD

SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT RENEWAL NOTIFICATION CERTIFICATE**RE: REFERENCE NUMBER: 5901**

Loan Number: [REDACTED] 3204

Hazard Insurance Uninsured Date: 06/27/2010

Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: M-7093936

Effective Date: 06/27/2010

Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2011

Annual Charge: \$1,778.00

Deductible: \$1,000.00

Dear Customer:

During the past 60 days, we notified you that the lender-placed hazard insurance we previously obtained on your property would be renewed for an additional term of one year, if we did not receive a copy of a valid hazard insurance policy.

This letter is to notify you that, as we have not received the required evidence of coverage, we have renewed your lender-placed hazard insurance coverage with MERITPLAN INSURANCE COMPANY to provide the necessary insurance protection on your property as required under the terms of your mortgage / deed of trust.

The cost of the insurance in the amount of \$1,778.00 was advanced for the period 06/27/2010 to 06/27/2011. This amount is based on our records which indicate the occupancy status of the location above is Owner Occupied and the dwelling is a 51+ year old home. If this information is incorrect, please contact us at (800) 256-9962. The coverage amount placed is based on the replacement value, which we believe is the last known amount of coverage you purchased. If, however, we do not have that information, the coverage amount is based on the unpaid principal balance of all mortgage liens against the property that are serviced by us. Lender-placed hazard insurance does not provide guaranteed replacement cost coverage.

This insurance will remain in force unless we received evidence of a hazard insurance policy with an effective date on or before 06/27/2010. As set forth in our previous notices, pursuant to your mortgage / deed of trust, the cost of this coverage is your responsibility and will be included in any statements that you may receive going forward. If you obtain coverage on your own and there is a lapse between the effective date of your policy and the lender-placed hazard insurance coverage, you will be responsible for the insurance charges for that period. Any insurance charges not used will be credited to your account.

RE: MOHAMMED GHODS
HEIDI GHODS
Loan Number: [REDACTED] 3204

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained is to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect your equity in the property. If the limit is only sufficient to insure the principal balance of your loan then the lender-placed hazard insurance coverage may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange for on your own. We recommend you place full insurance coverage that adequately protects both your interest as well as ours with a company of your choice. In the event of a claim, all amounts due under the policy will be paid to GMAC Mortgage, LLC, except amounts which are in excess of our interest which will be forwarded to you.

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC MORTGAGE, LLC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

If you have any questions in this matter, please do not hesitate to contact our office at (800) 256-9962 from 4 a.m. to 8 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Notice Regarding Bankruptcy: If you have filed for bankruptcy and your case is still active or if you have received an order of discharge, please be advised that this is not an attempt to collect a pre-petition or discharged debt. Any action taken by GMAC Mortgage, LLC is for the sole purpose of protecting our lien interest in your property and not to recover any amounts from you personally. If you have surrendered your property during your bankruptcy case and you are no longer occupying the property, you may disregard this notice. **If you are represented by an attorney in a bankruptcy proceeding, you should review this notice and discuss any questions you may have regarding this notice with your attorney.**

Thank you,

Insurance Department
GMAC Mortgage, LLC

REMINDER...

MAIL POLICY TO:

GMAC MORTGAGE, LLC
ITS SUCCESSOR AND/OR ASSIGNS
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

Or Fax to: (866) 336-9021

Exhibit A-2 Pg 49 of 61
NOTICE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance
Risk Based Protection

MERITPLAN INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/02/2010

Control Number: M7093936

Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2010 Until: 06/27/2011, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

| | |
|------------|----------|
| \$1,000.00 | Occupied |
| \$1,000.00 | Vacant |

PREMIUM: Insurance premium:

\$1,778.00

Total Premium:

\$1,778.00

The NAMED INSURED has purchased insurance on the DESCRIBED LOCATION for the amount and premium indicated above.

The contract of insurance is only between the NAMED INSURED and Meritplan Insurance Company. There is no contract of insurance between the BORROWER and Meritplan Insurance Company. The insurance purchased is intended for the benefit and protection of the NAMED INSURED, insures against LOSS only to the dwelling and OTHER STRUCTURES on the DESCRIBED LOCATION, and may not sufficiently protect the BORROWER'S interest in the property. No coverage is provided for contents, personal effects, additional living expense, fair rental value or liability. NO COVERAGE IS PROVIDED FOR LOSS CAUSED BY EARTHQUAKE OR FLOOD or any other cause of loss that is excluded by the Residential Property Fire Insurance Form. The NAMED INSURED may cancel the insurance coverage at any time.

This NOTICE is for information purposes only. It does not amend, extend, or alter the insurance contained in the Residential Property Fire Insurance Form. Any coverage provided is subject to the terms, conditions, limitations and exclusions contained in the Residential Property Fire Insurance Form.

To report a claim, call: (800) 323-7466

For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 2, 2010

POLICY NUMBER: [REDACTED] 8936

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

Date: JULY 2, 2010

Control Number: M-7093936

000004 - 000021

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the MERITPLAN Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), MERITPLAN will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to MERITPLAN Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number M7093936. The coverage amount will be \$254,000.00.

Signature

Date

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/01/2011

0000003-0000013 GMACP 001 1 870238

000003 - 000013
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT RENEWAL NOTIFICATION CERTIFICATE

RE: **REFERENCE NUMBER: 5901**

Loan Number: 3204
Hazard Insurance Uninsured Date: 06/27/2011
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: M-7152846
Effective Date: 06/27/2011
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2012
Annual Charge: \$862.00

Deductible: \$1,000.00

Dear Customer:

During the past 60 days, we notified you that the lender-placed hazard insurance we previously obtained on your property would be renewed for an additional term of one year, if we did not receive a copy of a valid hazard insurance policy.

This letter is to notify you that, as we have not received the required evidence of coverage, we have renewed your lender-placed hazard insurance coverage with MERITPLAN INSURANCE COMPANY to provide the necessary insurance protection on your property as required under the terms of your mortgage / deed of trust.

The cost of the insurance in the amount of \$862.00 was advanced for the period 06/27/2011 to 06/27/2012. This amount is based, in part, on our records which indicate the occupancy status of the location above is Owner Occupied, the dwelling is a 50-84 year old home, and other rating factors. If this information is incorrect, please contact us at (800) 256-9962. The coverage amount placed is based on the replacement value, which we believe is the last known amount of coverage you purchased. If, however, we do not have that information, the coverage amount is based on the unpaid principal balance of all mortgage liens against the property that are serviced by us. Lender-placed hazard insurance does not provide guaranteed replacement cost coverage.

This insurance will remain in force unless we received evidence of a hazard insurance policy with an effective date on or before 06/27/2011. As set forth in our previous notices, pursuant to your mortgage / deed of trust, the cost of this coverage is your responsibility and will be included in any statements that you may receive going forward. The charges for this insurance, and any state imposed fees, would be paid from your escrow/impound account. If you do not have an escrow/impound account, one may be established. If you obtain coverage on your own and there is a lapse between the effective date of your policy and the lender-placed hazard insurance coverage, you will be responsible for the insurance charges for that period. Any insurance charges not used will be credited to your account.

RE: MOHAMMED GHODS

HEIDI GHODS

Loan Number: [REDACTED] 3204

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained is to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect your equity in the property. If the limit is only sufficient to insure the principal balance of your loan then the lender-placed hazard insurance coverage may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. This insurance may be more expensive than coverage you could arrange for on your own. We recommend you place full insurance coverage that adequately protects both your interest as well as ours with a company of your choice. In the event of a claim, all amounts due under the policy will be paid to GMAC Mortgage, LLC, except amounts which are in excess of our interest which will be forwarded to you.

When you furnish acceptable proof of other insurance, the lender will cancel the insurance coverage and you will be entitled to a refund of any insurance charges not used. GMAC MORTGAGE, LLC and/or an affiliate of our company may receive compensation as a result of the placing of this insurance.

If you have any questions in this matter, please do not hesitate to contact our office at (800) 256-9962 from 4 a.m. to 8 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Notice Regarding Bankruptcy: If you have filed for bankruptcy and your case is still active or if you have received an order of discharge, please be advised that this is not an attempt to collect a pre-petition or discharged debt. Any action taken by GMAC Mortgage, LLC is for the sole purpose of protecting our lien interest in your property and not to recover any amounts from you personally. If you have surrendered your property during your bankruptcy case and you are no longer occupying the property, you may disregard this notice. **If you are represented by an attorney in a bankruptcy proceeding, you should review this notice and discuss any questions you may have regarding this notice with your attorney.**

Thank you,

Insurance Department
GMAC Mortgage, LLC

REMINDER...

MAIL POLICY TO:

GMAC MORTGAGE, LLC
ITS SUCCESSOR AND/OR ASSIGNS
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

Or Fax to: (866) 336-9021

Exhibit A-2 Pg 54 of 61
NOTICE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance
 Risk Based Protection

MERITPLAN INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/01/2011

Control Number: M7152846

Policy Number: [REDACTED] 0002

Loan Number: [REDACTED] 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
 INSURANCE SERVICE CENTER
 P.O. BOX 4025
 CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
 HEIDI GHODS
 11022 BENT TREE RD
 SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2011 Until: 06/27/2012, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
 TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

| | |
|------------|----------|
| \$1,000.00 | Occupied |
| \$1,000.00 | Vacant |

PREMIUM: Insurance premium:

\$862.00

Total Premium:

\$862.00

The NAMED INSURED has purchased insurance on the DESCRIBED LOCATION for the amount and premium indicated above.

The contract of insurance is only between the NAMED INSURED and Meritplan Insurance Company. There is no contract of insurance between the BORROWER and Meritplan Insurance Company. The insurance purchased is intended for the benefit and protection of the NAMED INSURED, insures against LOSS only to the dwelling and OTHER STRUCTURES on the DESCRIBED LOCATION, and may not sufficiently protect the BORROWER'S interest in the property. No coverage is provided for contents, personal effects, additional living expense, fair rental value or liability. NO COVERAGE IS PROVIDED FOR LOSS CAUSED BY EARTHQUAKE OR FLOOD or any other cause of loss that is excluded by the Residential Property Fire Insurance Form. The NAMED INSURED may cancel the insurance coverage at any time.

This NOTICE is for information purposes only. It does not amend, extend, or alter the insurance contained in the Residential Property Fire Insurance Form. Any coverage provided is subject to the terms, conditions, limitations and exclusions contained in the Residential Property Fire Insurance Form.

To report a claim, call: (800) 323-7466

For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 1, 2011

POLICY NUMBER: [REDACTED] 2846

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

MERITPLAN INSURANCE COMPANY
3349 Michelson Drive, Suite 200
Irvine, CA 92612-8893

Exhibit A-2 Pg 56 of 61

Date: JULY 1, 2011

Control Number: M-7152846

000003 - 000019

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the MERITPLAN Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), MERITPLAN will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to MERITPLAN Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number M7152846. The coverage amount will be \$254,000.00.

Signature

Date

GMAC Mortgage

PO Box 4025
Coraopolis, PA 15108-6942

Notification Date: 07/01/2012

0000013-0000031 GMACP 001 1 943496

000014 - 000033
MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

NOTICE OF PLACEMENT RENEWAL NOTIFICATION CERTIFICATE

RE: **REFERENCE NUMBER: 5901**

Loan Number: 3204
Hazard Insurance Uninsured Date: 06/27/2012
Property Location: 12752 KEITH PLACE
TUSTIN CA 92780

Certificate Number: M-7206368
Effective Date: 06/27/2012
Dwelling Limit: \$254,000.00

Expiration Date: 06/27/2013
Annual Charge: \$894.00

Deductible: \$1,000.00

Dear Customer:

During the past 45 days, we notified you that the lender-placed hazard insurance we previously obtained on your property would be renewed for an additional term of one year, if we did not receive a copy of a valid hazard insurance policy.

This letter is to notify you that, as we have not received the required evidence of coverage, we have renewed your lender-placed hazard insurance coverage with MERITPLAN INSURANCE COMPANY to provide the necessary insurance protection on your property as required under the terms of your mortgage / deed of trust.

The cost of the insurance in the amount of \$894.00 was advanced for the period 06/27/2012 to 06/27/2013. This amount is based, in part, on our records which indicate the occupancy status of the location above is Owner Occupied, the dwelling is a 50-84 year old home, and other rating factors. If this information is incorrect, please contact us at (800) 256-9962. The coverage amount placed will be based on the replacement value, which we believe is the last known amount of coverage you purchased. If we do not have that information, the coverage amount will be based on the unpaid principal balance of all mortgage liens against the property that are serviced by us. Lender-placed hazard insurance does not provide guaranteed replacement cost coverage.

This insurance will remain in force unless we received evidence of a hazard insurance policy with an effective date on or before 06/27/2012. As set forth in our previous notices, pursuant to your mortgage / deed of trust, the cost of this coverage is your responsibility and will be included in any statements that you may receive going forward. The charges for this insurance, and any state imposed fees, would be paid from your escrow/impound account. If you do not have an escrow/impound account, one may be established. If you obtain coverage on your own and there is a lapse between the effective date of your policy and the lender-placed hazard insurance coverage, you will be responsible for the insurance charges for that period. Any insurance charges not used will be credited to your account.

If you have a hazard policy in effect, please forward a copy of the policy to our office immediately, or fax a copy of your policy to us at (866) 336-9021. Please make sure that the appropriate loss payee clause naming us as the mortgagee, is

RE: MOHAMMED GHODS
HEIDI GHODS
Loan Number: [REDACTED] 3204

GMAC Mortgage, LLC, Its Successors and/or Assigns. We recommend you speak with your insurance company or agent for assistance.

IMPORTANT NOTICE TO CUSTOMER

The insurance we obtained is to protect our interest in your property applies only to the dwelling at the coverage amount indicated. Coverage does not extend to contents or personal property and may not be adequate to protect your equity in the property. If the limit is only sufficient to insure the principal balance of your loan then the lender-placed hazard insurance coverage may not be adequate to protect the value of your property that exceeds the amount of your mortgage. Also, there is no coverage for liability protection with this insurance. The cost of lender placed insurance may be significantly higher than insurance you are able to obtain on your own. We recommend you place full insurance coverage that adequately protects both your interest as well as ours with a company of your choice. In the event of a claim, all amounts due under the policy will be paid to GMAC Mortgage, LLC, except amounts which are in excess of our interest which will be forwarded to you.

If you have any questions in this matter, please do not hesitate to contact our office at (800) 256-9962 from 4 a.m. to 8 p.m. PST, Monday through Friday. If you would like to submit a claim, please call (800) 323-7466. Your call may be monitored for quality assurance.

Notice Regarding Bankruptcy: If you have filed for bankruptcy and your case is still active or if you have received an order of discharge, please be advised that this is not an attempt to collect a pre-petition or discharged debt. Any action taken by GMAC Mortgage, LLC is for the sole purpose of protecting our lien interest in your property and not to recover any amounts from you personally. If you have surrendered your property during your bankruptcy case and you are no longer occupying the property, you may disregard this notice. **If you are represented by an attorney in a bankruptcy proceeding, you should review this notice and discuss any questions you may have regarding this notice with your attorney.**

Thank you,

Insurance Department
GMAC Mortgage, LLC

REMINDER...

MAIL POLICY TO:

GMAC MORTGAGE, LLC
ITS SUCCESSOR AND/OR ASSIGNS
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

Or Fax to: (866) 336-9021

NOTICE OF LENDER-PLACED INSURANCE

Residential Property Fire Insurance
Risk Based Protection

MERITPLAN INSURANCE COMPANY

(a stock company)

Home Office

3349 Michelson Drive, Suite 200, Irvine, CA 92612-8893

Date: 07/01/2012

Control Number: M7206368

Policy Number: 0002

Loan Number: 3204

NAMED INSURED:

GMAC MORTGAGE, LLC
INSURANCE SERVICE CENTER
P.O. BOX 4025
CORAOPOLIS, PA 15108-6942

BORROWER:

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Coverage Period: From: 06/27/2012 Until: 06/27/2013, beginning and ending at 12:01 am Standard time at the DESCRIBED LOCATION.

DESCRIBED LOCATION:

12752 KEITH PLACE
TUSTIN CA 92780

LIMIT OF LIABILITY FOR RESIDENTIAL PROPERTY:

\$254,000.00

DEDUCTIBLES:

| | |
|------------|----------|
| \$1,000.00 | Occupied |
| \$1,000.00 | Vacant |

PREMIUM: Insurance premium:

\$894.00

Total Premium:

\$894.00

The NAMED INSURED has purchased insurance on the DESCRIBED LOCATION for the amount and premium indicated above.

The contract of insurance is only between the NAMED INSURED and Meritplan Insurance Company. There is no contract of insurance between the BORROWER and Meritplan Insurance Company. The insurance purchased is intended for the benefit and protection of the NAMED INSURED, insures against LOSS only to the dwelling and OTHER STRUCTURES on the DESCRIBED LOCATION, and may not sufficiently protect the BORROWER'S interest in the property. No coverage is provided for contents, personal effects, additional living expense, fair rental value or liability. NO COVERAGE IS PROVIDED FOR LOSS CAUSED BY EARTHQUAKE OR FLOOD or any other cause of loss that is excluded by the Residential Property Fire Insurance Form. The NAMED INSURED may cancel the insurance coverage at any time.

This NOTICE is for information purposes only. It does not amend, extend, or alter the insurance contained in the Residential Property Fire Insurance Form. Any coverage provided is subject to the terms, conditions, limitations and exclusions contained in the Residential Property Fire Insurance Form.

To report a claim, call: (800) 323-7466

For other inquiries, call: (800) 256-9962

BALBOA INSURANCE COMPANY
3349 MICHELSON DRIVE, SUITE 200
IRVINE, CA 92612-8893

CALIFORNIA RESIDENTIAL PROPERTY INSURANCE DISCLOSURE

MOHAMMED GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

MAILING DATE: JULY 1, 2012

POLICY NUMBER: [REDACTED] 6368

THIS DISCLOSURE IS REQUIRED BY CALIFORNIA LAW (SECTION 10102 OF THE INSURANCE CODE). IT IDENTIFIES THE FORM OF DWELLING COVERAGE YOUR LENDER HAS PURCHASED ON YOUR BEHALF.

THIS DISCLOSURE FORM CONTAINS ONLY A GENERAL DESCRIPTION OF YOUR COVERAGE AND IS NOT PART OF YOUR POLICY. ONLY THE SPECIFIC PROVISIONS OF YOUR LENDER'S MASTER POLICY WILL DETERMINE WHETHER A PARTICULAR LOSS IS COVERED AND, IF SO, THE AMOUNT PAYABLE. ALSO, YOUR LENDER'S MASTER POLICY MAY CONTAIN POLICY EXCLUSIONS OR LIMITATIONS ON CERTAIN RISKS.

IF YOU HAVE QUESTIONS REGARDING YOUR FORCE PLACED COVERAGE YOU MAY CALL THE PHONE NUMBER OR WRITE TO THE ADDRESS DISPLAYED ON YOUR COVERAGE LETTER. YOU MAY ALSO CALL THE CALIFORNIA DEPARTMENT OF INSURANCE CONSUMER INFORMATION LINE AT (800) 927-HELP.

DWELLING COVERAGE PROVIDED: REPLACEMENT COST COVERAGE

REPLACEMENT COST COVERAGE PAYS REPLACEMENT COSTS UP TO POLICY LIMITS.

IN THE EVENT OF ANY COVERED LOSS TO YOUR HOME, THE INSURANCE COMPANY WILL PAY TO REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING WITH LIKE OR EQUIVALENT CONSTRUCTION UP TO THE APPLICABLE LIMIT OF LIABILITY. REFER TO YOUR COVERAGE LETTER FOR THE LIMIT WHICH APPLIES TO YOUR DWELLING. IF DAMAGE EXCEEDS 5% OF COVERAGE LIMIT OR \$1,000, YOU MUST REPAIR OR REPLACE THE DAMAGED OR DESTROYED DWELLING IN ORDER TO OBTAIN A REPLACEMENT COST COVERAGE SETTLEMENT. THE AMOUNT OF RECOVERY WILL BE REDUCED BY THE DEDUCTIBLE DISPLAYED ON YOUR COVERAGE LETTER (DEDUCTIBLE MAY CHANGE IF OCCUPANCY IS DIFFERENT AT THE TIME OF LOSS). BUILDING CODE UPGRADE COVERAGE IS NOT INCLUDED.

Date: JULY 1, 2012

Control Number: M-7206368

000014 - 000039

MOHAMMED GHODS
HEIDI GHODS
11022 BENT TREE RD
SANTA ANA, CA 92705-2514

Re: Loan Number: [REDACTED] 3204
Property Address: 12752 KEITH PLACE
TUSTIN CA 92780

Dear Mohammed and Heidi Ghods:

Coverage provided does not include protection against the peril of earthquake. California law requires that earthquake coverage be offered to you at your option. The coverage, subject to policy provisions, may be purchased at additional cost on the following terms:

- A. Amount of Dwelling Coverage: \$254,000.00.
- B. Applicable Deductible: 10.0% of Actual Cash Value
If your loss is below this amount, you may not receive any payment from your coverage. Your insurance company or agent will provide written notice as to how the deductible applies to the market value of your coverage, the insured value of your coverage or the replacement value of your coverage.
- C. Annual Premium: \$1,143.00

You must ask the MERITPLAN Insurance Company to add Earthquake Coverage within 30 days from the date this notice is mailed or it shall be conclusively presumed that you have not accepted this offer. In the event of a major earthquake (5.0 magnitude or greater), MERITPLAN will institute, without notice, up to a 60 day moratorium on earthquake coverage for properties within 100 miles of the epicenter. If you accept this coverage, it will be effective the date your acceptance is received by us or upon the expiration date of our moratorium, whichever date is later.

If you have any questions, please contact us at the address above.

**** PLEASE NOTE, YOU MUST RETURN THIS ENTIRE LETTER ****
TO ACTIVATE EARTHQUAKE COVERAGE

YOU ARE NOT OBLIGATED TO PURCHASE THIS COVERAGE AND WE WILL TAKE NO FURTHER ACTION
UNLESS WE HEAR FROM YOU.

If you wish to add Earthquake Coverage to your certificate, please complete the section below, sign and return this letter to MERITPLAN Insurance Company. We will bill you the appropriate premium for the period from the effective date of your Earthquake Coverage (see above information regarding when coverage will be made effective) to the expiration date of your certificate. As a result, the premium billed may be less than the full annual premium quoted in this offer.

____ Yes, please add Earthquake Coverage to certificate number M7206368. The coverage amount will be \$254,000.00.

Signature

Date